

Message Text

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C O N F I D E N T I A L NEW DELHI 7727

DEPARTMENT PASS AID

E.O. 11652: GDS
TAGS: SPOP
SUBJECT: AMBASSADOR'S ROLE VIS-A-VIS POPULATION GROWTH AND FOOD
PRODUCTION IN INDIA

REF: STATE 107370

1. STATE 107370 DISCUSSED THE IMPORTANCE THE US GOVERNMENT
ATTACHES TO THE REDUCTION OF POPULATION GROWTH AS PART OF
OUR OVERALL DEVELOPMENT STRATEGY AIMED AT MEETING THE BASIC
NEEDS OF THE POOR, STRESSED THE AMBASSADOR'S ROLE IN AD-
VANCING THOSE OBJECTIVES, AND REQUESTED A REPORT FROM HIM
BY JUNE 1.

2. SOME GENERAL BACKGROUND IS PERHAPS IN ORDER, AS A PRE-
LIMINARY TO THIS REPORT. INDIA HAS MADE GREAT STRIDES IN
FOOD PRODUCTION, AIDED BY GOOD MONSOONS IN THE LAST THREE
YEARS, AND NOW HAS FOOD GRAIN STOCKS IN THE NEIGHBORHOOD OF
20 MILLION TONS. THE JANATA GOVERNMENT'S PLANS PUT IN-
CREASED EMPHASIS ON RURAL DEVELOPMENT AIMED TO IMPROVE THE
CONDITION OF INDIA'S VILLAGERS, SOME 80 PERCENT OF THE
POPULATION. STRONG EFFORTS ARE BEING MADE TO BRING MORE
ACREAGE UNDER IRRIGATION. FOOD-FOR-WORK PROGRAMS IN THE
STATES ARE BEING GREATLY EXPANDED. A NEW RURAL HEALTH
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SCHEME, DESIGNED EVENTUALLY TO COVER ALL OF INDIA'S
600,000 VILLAGES THROUGH AN INTEGRATED SYSTEM OF COMMUNITY
HEALTH WORKERS (PARAMEDICS), RURAL CLINICS, AND DISTRICT
HOSPITALS LINKED TO MEDICAL COLLEGES, HAS BEEN
INITIATED.

3. THESE ARE ALL LONG-TERM SCHEMES WHICH IN THE BEST OF

CIRCUMSTANCES ARE NOT GOING TO ERADICATE POVERTY FROM THE INDIA COUNTRYSIDE WITHIN TEN YEARS, POLITICIANS TO THE CONTRARY. THROUGHOUT ALL THESE AREAS IMPLEMENTATION IS FAR HARDER THAN CONCEPTUALIZATION. BUT IT CAN FAIRLY BE SAID THAT IN ALMOST ALL SIGNIFICANT RESPECTS THE DEVELOPMENT PRIORITIES OF THE GOVERNMENT OF INDIA CONFORM CLOSELY TO THOSE SET IN WASHINGTON FOR US AID, AND PURPOSEFUL EFFORTS ARE BEING MADE TO MOVE ON THESE PRIORITIES. INDIAN LEADERS, THEN, NEED LITTLE JAW-BONING ON MOST OF THESE MATTERS.

4. THE LARGEST AND MOST DISTURBING EXCEPTION TO THESE GENERALIZATIONS IS THE AREA OF FAMILY PLANNING. NATION-WIDE, BUT ESPECIALLY IN ITS NORTHERN STATES, FAMILY PLANNING PROGRAMS WERE DELIVERED A MAJOR SETBACK BY THE COMPULSORY STERILIZATION MEASURES INSTITUTED DURING MRS. GANDHI'S EMERGENCY. EXCEPT FOR SOME EXCELLENT BUT ISOLATED UNDERTAKINGS, MAINLY UNDER PRIVATE VOLUNTARY AUSPICES, ORGANIZED EFFORT TO CONTROL THE RATE OF POPULATION GROWTH HAS BEEN AT A STANDSTILL DURING MOST OF THE JANATA GOVERNMENT'S FIRST YEAR IN OFFICE. VARIOUS REPORTS FROM THE EMBASSY, MOST RECENTLY A-108 OF MAY 12, 1978, HAVE GIVEN FURTHER BACKGROUND.

5. THE SERIOUSNESS OF THIS LOSS OF MOMENTUM IN POPULATION CONTROL IS, HOWEVER, NOW AT LAST BEING INCREASINGLY CONFIDENTIAL

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RECOGNIZED AT HIGH LEVELS OF THE INDIAN GOVERNMENT, AND SOME CORRECTING MEASURES ARE BEING LAUNCHED. THIS IS EVIDENT IN VARIOUS WAYS, INCLUDING CONVERSATIONS WHICH I HAVE RECENTLY HAD ON THE SUBJECT WITH THE UNION HEALTH MINISTER AND THE PRIME MINISTER'S PRINCIPAL SECRETARY.

6. AT THE BEGINNING OF THIS MONTH, THE HEALTH MINISTER USED THE OPPORTUNITY OF A SPEECH IN DELHI TO REPRESENTATIVES OF VOLUNTARY AGENCIES TO EXTOL THE BENEFITS OF LIMITED FAMILIES AND TO EXHORT THE VOLUNTARY AGENCIES TO REDOUBLED EFFORTS. HIS MINISTRY HAS DEVELOPED AND IS NOW AGAIN DISTRIBUTING WRITTEN MATERIALS ON FAMILY PLANNING. SOME VERY SOPHISTICATED RESEARCH ON CONTRACEPTIVES IS BEING ACTIVELY PURSUED AND ATTENTION IS BEING GIVEN AS WELL TO INDIGENOUS HERBAL REMEDIES. IN ADDITION, THE MINISTER CLAIMS THAT FAMILY PLANNING RATIONALE AND METHODS ARE VERY MUCH PART OF THE BASIC TRAINING BEING GIVEN TO COMMUNITY HEALTH WORKERS IN THE NEW RURAL HEALTH SCHEME. IT IS TOO EARLY TO HAVE MUCH CONFIDENCE IN THE EFFICACY OF THIS TRAINING, WHICH RUNS A BARE THREE MONTHS; BUT ONE CAN HARDLY QUARREL TODAY WITH THE PROPOSITIONS THAT FAMILY PLANNING INFORMATION AND SER-

VICE ARE BEST INCORPORATED IN FAMILY HEALTH SERVICES AND THAT THE GREATEST NEED IN INDIA IS TO GET THIS INFORMATION AND SERVICE DOWN TO THE PEOPLE AT THE GRASS ROOTS -- NAMELY, INDIA'S 450 PLS MILLION VILLAGERS. MINISTER RAJ NARAIN FURTHER TOLD ME THAT HE HAD RECENTLY BEEN IN TOUCH WITH THE CHIEF MINISTER OF EVERY STATE TO MAKE CLEAR THAT FUNDS CENTRALLY ALLOCATED TO THE STATES FOR HEALTH PURPOSES MUST NOT BE DIVERTED TO OTHER USES (AS HAS HAPPENED IN THE PAST), AND THAT IN THE USE OF THE CENTRALLY ALLOCATED FUNDS PRIORITY MUST BE GIVEN TO THE DEVELOPMENT OF RURAL HEALTH SERVICES INCLUDING FAMILY PLANNING.

7. MR. V. SHANKAR, PRINCIPAL SECRETARY TO PRIME MINISTER
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DESAI, INFORMED ME EARLIER THIS MONTH THAT THE PRIME MINISTER HAD JUST WRITTEN PERSONALLY TO EACH CHIEF MINISTER TO DRAW PARTICULAR ATTENTION TO THE NEED FOR MORE EFFECTIVE STATE FAMILY PLANING PROGRAMS. WHILE EMPHASIZING EDUCATIONAL ACTIVITY AND THE AVOIDANCE OF COMPULSION, HE HAS CALLED FOR THE DEVELOPMENT OF SUITABLE MACHINERY IN EACH STATE TO PROPAGANDIZE THE BENEFITS BOTH TO THE FAMILY AND THE SOCIETY AND TO DELIVER THE NEEDED SERVICES. IN ADDITION, HE HAS TOLD THE CHIEF MINISTERS THAT THE CENTRAL GOVERNMENT IS GOING TO LINK THE RELEASE OF CENTRAL PLAN ASSISTANCE TO EACH STATE'S PERFORMANCE IN FAMILY PLANNING WORK. THE RELEASE OF EIGHT PERCENT OF CENTRAL PLAN ASSISTANCE TO EVERY STATE WILL BE GOVERNED BY AN EVALUATION OF ITS PERFORMANCE IN POPULATION CONTROL. FRONG-PAGE NEWS STORIES IN THE INDIAN EXPRESS AND THE STATESMAN HAVE SUBSEQUENTLY HIGHLITED THIS DEVELOPMENT.

8. V. SHNAKR ALSO EMPHASIZED TO ME THE NEED TO GET FAMILY PLANNING INFORMATION AND ACTIVITY OUT INTO THE VILLAGES. TO THAT END HE SEES THE NEED FOR A GREATER DECENTRALIZATION OF AUTHORITY FROM THE STATES TO THE DISTRICTS, WITH EACH DISTRICT HEADQUARTERS BOTH MADE RESPONSIBLE FOR THE COORDINATION OF ALL ELEMENTS OF DEVELOPMENT IN THE DISTRICT AND HELD ACCOUNTABLE FOR THE EXTENT TO WHICH ITS WORK CARRIES OUT INTO THE VILLAGES.

9. ALL THIS SUGGESTS THAT HERE TOO WITH RESPECT TO POPULATION CONTROL INDIA'S LEADERS HAVE LITTLE T LEARN FROM US. WE CAN AT THE MOST QUIETLY ENCOURAGE A BOLDER EXERCISE OF POLIITICAL WILL IN THIS AREA WHERE POPULAR SENSITIVITIES ARE STILL RAW. WHEN AND IF THEY ASK FOR SPECIFIC KINDS OF ASSISTANCE -- AS FOR EXAMPLE IN COMMUNITY HEALTH TRAINING, THE CONSTRUCTION OF 30-BED RURAL HOSPITALS, OR THE BUILDING
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OF NEW CONDOM FACOTRIES--WE CAN BE WILLING TO EXTEND IT. OVERALL, HWEVER, INDIA'S LEADERS KNOW THE MAGNITUDE AND SERIOUSNESS OF THE COUNTRY'S POPULATION PROBLEM. THE CHALLENGE THEY FACE IS HOW TO REDUCE IT APPRECIABLY USING MEANS THAT RESPECT HUMAN SENSITIVITIES AND HUMAN RIGHTS WHILE PROVING EFFECTIVE AGAINST WIDESPREAD IGNORANCE, DISTRUST, AND FEAR. AT LEAST IN MY CONTACTS, BESIDES THOSE CITED IN THIS MESSAGE, I HAVE FOUND MANY INDIANS ACUTELY AWARE OF THE POPULATION PROBLEM. THERE HAS BEEN LITTLE NEED TO EXHORT SUCH AWARENESS OR TO ENTER INTO ANY BROAD SOCIO-ECONOMIC ANALYSIS OF THE CONSEQUENCES OF THE CURRENT LEVELS OF POPULATION GROWTH. THOSE THINGS ARE WIDELY UNDERSTOOD, AS IS THE MORE FAVORABLE EXPERIENCE OF SRI LANKA AND KERALA AND THE PROBABLE REASONS THEREOF. THE TALK INSTEAD ALMOST ALWAYS TURNS TO THE OUTBACK CAUSED BY THE EMERGENCY AND TO THE PROBLEMS OF CONSTRUCTING A NATIONAL PROGRAM THAT CAN OVERCOME THE EFFECTS OF THOSE EXCESSES AND GO ON TO BRING ABOUT, WITHIN A REASONABLE SPAN OF YEARS, A SIGNIFICANT REDUCTION IN INDIA'S BIRTH RATE. GOHEEN

NOTE BY OC/T: MESSAGE DELAYED IN TRANSMISSION.

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